



U.S. Department of Transportation  
National Highway Traffic Safety Administration

**DOT Auto Safety Hotline**  
**Vehicle Owner's Questionnaire**  
To Report Vehicle Safety Defects  
1-888-DASH-2-DOT  
(1-888-327-4236)  
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 1220

Date Received

2004 DEC 21

Repository

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Reference No: 39  
10101554

**OWNER INFORMATION (Type or Print)**

Name

Address

City NORTH HUNTINGDON

State PA

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  NO  
In the absence of an authorized signature, write the name and address to the vehicle manufacturer.

Signature of Owner [Signature] Date 12/08/04

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

ZHGES165X4F

Make

HONDA

Model

CRVC

Model Year

2004

Date Purchased

06/08/04

Dealer's Name and Telephone Number

Honda Village 1-800-654-3325

Engine: 115hp (1.7L)

No: Cylinders 4 SWC 16V

Fuel Type:

Unleaded

Original Owner

Dealer's City

Greensburg

State

PA

Zip Code

15601

Transmission Type

Auto

Antilock Brakes

Cruise Control

Powertrain

Vehicle Component Code

LS2000 SEAT BELTS: REAR

Multiple Failure: 1 (At least 5)

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Incident Date(s)

02-AUG-2004

Failure Mileage

? Current mileage

Failure Speed

N/A

Rear seat belt, passenger side, won't stay latched.

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE N/A**

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM1SABC036)

Original Equipment

Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE N/A**

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

N/A

Crash

Yes  No

Fire

Yes  No

Number of Persons Injured

0

Number of Deaths

0

Reported to Police

N

Narrative Description of Incident(s), Crash(es), and Injury(ies).

Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).

THE REAR PASSENGER SEAT BELT UNLATCHED BY ITSELF AUTOMATICALLY. WHILE DRIVING THE CONSUMER COULD HEAR A NOISE. PLEASE PROVIDE ANY FURTHER INFORMATION. \*1B

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974 (Public Law 93-579) This information is requested pursuant to authority vested in the National Highway Traffic Safety Administration and subsequent amendments. You are under no obligation to respond to this questionnaire. Your response may be used to assist the NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.